

College Governors elect a new slate of officers

The Board of Governors of the American College of Surgeons, at its adjourned meeting Wednesday afternoon, elected Robert C. Hickey of Houston, and David C. Sabiston, Jr. of Durham, chairman and vice chairman, respectively.

Luis F. Sala, Ponce, Puerto Rico, was elected secretary, replacing Dr. Sabiston.

The Governors also elected Franklin L. Shively, Jr., Dayton; Colin Campbell Ferguson, Winnipeg; and Donald M. Gallagher, San Francisco, as members of their executive committee.

Dr. Hickey, who had served as vice-chairman of the Board, is a general surgeon in private practice, and has been a Fellow since 1952.

Dr. Sabiston, a Fellow since 1957, was secretary of the Board. He is professor and chairman of the department of surgery, Duke University Medical Center.

Dr. Sala, who had been on the Board's executive committee, is chairman of the department of surgery at the Hospital Santa Asilo de Damas, Ponce. He has been a Fellow since 1953.

54th President of ACS

Claude E. Welch to receive presidential honors tonite

Claude E. Welch, MD, FACS of Boston, who helped give birth to the American College of Surgeons' Surgical Education and Self-Assessment Program, will be inducted tonight as 54th President of the College. He succeeds William P. Longmire, Jr., MD, FACS of Los Angeles.

Dr. Welch, a professor of surgery at Harvard Medical School and a senior surgeon at Massachusetts General Hospital, has long been active in affairs of the College. He served as a Regent from 1963 to 1972, and was chairman of the College's program committee from 1968 to 1972.

The ACS is Dr. Welch's seventh presidency of a medical organization. He has held the presidencies of the Massachusetts Medical Society, the Society for Surgery of the Alimentary Tract, the New England Cancer Society, the Boston Surgical Society, the Excelsior Surgical Society and Harvard Medical Alumni Association.

The 67-year-old surgeon, who worked in a drug store to put himself through college and once helped a veterinarian perform autopsies, could just as easily have found a career in a laboratory as in an operating room.

Dr. Welch was born in Stanton, a small rural community about 100 miles northwest of Omaha. His father was a school superintendent. Dr. Welch graduated from Doane College, Crete, Neb., in 1927, then took a position as an assistant instructor in organic chemistry while obtaining his masters degree at the University of Missouri. Although he was deeply interested in chemistry, he felt an even stronger attraction to medicine.

He graduated from Harvard Medical School in 1932, receiving

his MD degree magna cum laude. He has since received honorary Doctor of Science degrees from Doane and from the University of Nebraska.

From 1932 to 1937, Dr. Welch was, successively, a surgical intern at Massachusetts General; a surgical resident at Pondville Cancer Hospital, Wrentham, Mass.; and a surgical resident at Massachusetts General and instructor in surgery at Harvard Medical School.

During World War II, as one of 45 doctors from Massachusetts General, he spent four years with the army's 6th General Hospital, seeing service in Casablanca, Rome and Bologna, and emerging as a lieutenant colonel in 1946.

Dr. Welch has written more than 200 scientific articles, chiefly on gastrointestinal disease and cancer, and three books: *Surgery of the Stomach and Duodenum* (1951), *Intestinal Obstruction* (1955) and *Polypoid Lesions of the Gastrointestinal Tract* (1964). He has just completed the fifth edition of the first of these books. He has been chairman of the Committee on Publications of the

New England Medical Journal for the past five years.

The Welch's have two sons: John P., a resident in surgery in the Massachusetts General Hospital, and Claude, Jr., an Oxford University PhD, and professor of political economy at State University of New York, Buffalo.

Dr. Welch is an active or honorary member of numerous surgical societies, and has presented lectures in most of the United States and many foreign countries. He has directed his professional efforts toward the care of surgical patients, clinical research and teaching.

Medicine has been his life. "It's such an extremely absorbing profession", he once said, "that one cannot help but be totally involved in it".

Full schedule of tv, pictures set for today

A pediatric surgical procedure and a peripheral vascular operation are today's scheduled telecasts originating at the Loyola University Foster McGaw Hospital in Maywood, Ill., and viewed in the Chicago Room of McCormick Place. Viewers will be allowed to ask questions of the panelists, located in a studio near the operating suite, through the moderator, who will be present in the viewing room. Simultaneous communications will be conducted among the operating surgeons, panelists, and moderators.

A videotape of Wednesday's pancreas operation was made and will be shown today at 8:30 am in the Chicago Room.

An early morning film session on Orthopaedic Surgery will start off Thursday's Motion Picture Exhibition at 9:00 in the Lenox Lohr Theatre of McCormick Place. Four sessions totaling 16 films are on the screen docket today. All three afternoon sessions will begin at 1:00 and end by 3:00, so that Fellows and Initiates may attend the annual meeting at 4:00.



AN INITIATE FROM JAPAN, Y. Idezuki, MD, and soon to be FACS, poses for a formal portrait in the lobby of McCormick Place Wednesday morning. Photographer Herb Bushey has been making formal portraits of the initiates in cap-and-gown this week.

Convocation at 8:30

Record number of Initiates to become Fellows tonight

A class of 1,675 Initiates from around the world—the largest number in ACS history—will become Fellows of the American College of Surgeons this evening at 8:30 during Convocation ceremonies in the International Ballroom of the Conrad Hilton.

J. Englebert Dunphy, Chairman of the ACS Board of Regents, will present the Initiates to College President William P. Longmire, Jr., who will confer Fellowship.

Honorary Fellowships will be conferred on four distinguished surgeons: Sir Andrew Watt Kay, Glasgow, Scotland; Prof. Lars-Erik Gelin, Gothenburg, Sweden; Dr. Gerd R. E. Meyer-Schwickerath, Essen, West Germany; and Prof. Antonio Gonzalez-Revilla, Panama, the Republic of Panama.

Another highlight of the evening will be the installation of new officers. President Longmire will turn over the gavel and responsibilities of office to his successor, Claude E. Welch,

of Boston, who soon after will perform his first official function as President when he presents his presidential address, "Quality care, quasi-care, and quackery".

Others assuming new offices are first vice president Harry M. Spence, Dallas, succeeding Henry G. Schwartz; and Charles H. Herndon, Cleveland, second vice president, succeeding Woodard D. Beacham.

Persons other than Initiates, who do not require them, are urged to pick up tickets at the registration area at McCormick Place. All Initiates are urged to attend the assembly of Initiates at 4:45 this afternoon in Arie Crown Theatre, McCormick Place.

Pratt, Connolly, Beal elected to ACS Board of Regents

Three Fellows—Loring W. Pratt of Waterville, Maine; John E. Connolly of Irvine, California; and John M. Beal of Chicago—were elected Wednesday afternoon to the Board of Regents of the American College of Surgeons.

The three replace two Regents whose third terms expired in 1973: J. Englebert Dunphy of San Francisco, who served as Chairman for two years, and Paul H. Holinger of Chicago. John D. Martin, Jr. of Atlanta, who had served two terms, requested that he not be considered for a third term.

Reelected for additional three-year terms were Joseph E. Murray, Boston; Carl P. Schlicke, Spokane; and Frank E. Stinchfield, New York City.

Dr. Beal, who served as chairman of the ACS medical motion picture committee for seven

years, is professor and chairman of the department of surgery, Northwestern University School of Medicine. He has been a Fellow for 20 years.

Dr. Connolly, a Fellow since 1958, is professor and chairman of the department of surgery, University of California, Irvine.

Dr. Pratt, an otolaryngologist in private practice, has been a Fellow since 1952.

The new Regents were nominated by the 1973 nominating committee of the Board of Governors, chaired by Lucius D. Hill III of Seattle.



FIELD STAFF OF THE COMMISSION ON CANCER paused during the meeting of the Cancer Commission for a formal photo. Members include, front, l to r, Willard W. Webber, Cancer Program Advisor; Margaret M. Crowe, Cancer Registry consultant; Andrew Mayer, MD, FACS, ACS Assistant Director for Professional Activities (Cancer); Marjorie S. Krennerich and Cynthia M. Creech, both registry consultants; standing l to r, Claude S. Larson, MD, FACS; John A. Lawler, MD, FACS; Irwin Schulz, MD, FACS; and G. Russell Wright, MD, FACS, all surveyors for the ACS Cancer Program.

Physician-astronaut

Surgical skills kept at level of 1st year resident

A physician who has skills as an astronaut, airplane pilot, engineer, geologist, physicist, and astronomer says he has also maintained surgical skills "at the level of a first year resident". Dr. F. Story Musgrave delivered the I. S. Ravdin Lecture in the Basic Sciences Wednesday afternoon.

During his training, Dr. Musgrave worked as a surgical resident at Denver General Hospital in Colorado for four or five days each month.

"Most of my activities at DGH are those of a first or second year resident, but with slightly more emphasis on rounds, conferences, and seminars, and extensive time seeing a variety of patients in the emergency room to sharpen diagnostic skills and provide experience in the general practice that would be used by a physician on board a space station", he said.

"While part-time surgery has provided a love and excitement for surgery which was not appreciated while performing it full time, proficiency remains, year after year, at a level between a good surgical intern and a first year resident. The intern whom you assisted through an appendectomy in 1969 is now the chief resident who assists you through an abdominal exploration in 1973."

Dr. Musgrave said he continues interest in physiology and biophysics by teaching and doing research at the University of Kentucky Medical Center and Baylor Medical School. He flies to his assignments in his own plane, a surplus U.S. Air Force T-34. He also instructs in several kinds of general aviation aircraft.

After graduating from medical schools and completing his internship, Dr. Musgrave set out to win an appointment as an astronaut by concentrating on physiology and biophysics, with particular emphasis on cardiovascular and exercise physiology; on aerospace physiology and medicine; space sciences; and aeronautical and environmental training. He also undertook a rigorous program of physical fitness before applying for the astronauts corps in December, 1966, and winning selection in August, 1967. He was selected to the backup crew of the first Skylab mission, launched May 25, 1973.

Caps and gowns

Initiates can pick up their caps and gowns today in the Astoria Room of the Conrad Hilton Hotel between 9:30 am and 5:30 pm.

Blood supply short? Take it from patient

Reinfusing the patient's own blood in major blood vessel surgery has worked successfully, a group of investigators at Massachusetts General Hospital reported yesterday.

As the blood is recovered, it is treated with anti-clotting agents, defoamed, filtrated, and reinfused back into the patient on the operating table. An average of almost 1500 cubic centimeters (three pints) of blood was salvaged per patient. Half the patients required no transfusions from the blood bank.

The report was given by a team consisting of Bruce J. Brener, MD; Jeffrey K. Raines, PhD; Carolyn McI. Chesney, MD; Robert W. Colman, MD, FACP; and R. Clement Darling, MD, FACS, of MGH and the Harvard Medical School.

"With blood banks suffering recurring shortages, blood itself has become a national resource that must be conserved", said Dr. Brener. "Nevertheless, in patients undergoing elective surgery to replace portions of the largest abdominal artery, the aorta, several pints of blood are often shed and wasted".

The technique of intra-operative autotransfusion (IAT) is not new but for a variety of technical reasons has failed to win acceptance. The suction pressure used in most operating rooms was found to be injurious to red cells. The collection and delivery systems have been unwieldy and complicated. Effective filters have not been

previously available.

The MGH group has undertaken to solve these problems by combining equipment initially designed for cardiopulmonary bypass, including coronary suction tips, roller pumps, plastic cardiectomy reservoirs, silicone defoaming agents and efficient filters.

IAT has been used in 30 elective operations to replace portions of the abdominal aorta and results were compared with a similar group of patients in whom conventional transfusion techniques were used.

In 10 patients, the MGH-Harvard team found that the blood-salvaging procedure damaged both red blood cells and platelets. However, the body itself seemed to compensate.

The authors believe IAT can provide rapid support of blood volume for patients requiring it, avoid the possible risk of hepatitis that transfused blood may carry, and conserve scarce blood supply. At the same time, the investigators cautioned that only hospitals staffed with the necessary backup personnel employ the procedure which can cause serious adverse side effects unless techniques are followed.

Immunologic response test allows quicker therapy start

A test of a patient's ability to mount an immunologic response against cancer has been developed by a group at the University of California, Los Angeles. Theodore X. O'Connell, MD, said yesterday it can be performed immediately with no need to sensitize the patient first, thus permitting therapy to start sooner. Serial studies may be performed to determine changes in the immune response as a result of therapy or the course of the disease.

During the past several years it has been demonstrated that tumors possess antigens that can be recognized as foreign by the host. The recognition leads to an immunologic response that may result in rejection of the tumor. In some patients, the

immunologic response is limited because of blocking factors or other unknown mechanisms. The lymphocyte is the cell that recognizes foreign antigens and initiates the immune response.

Dr. O'Connell and his investigative team found that lymphocytes from cancer patients were depressed as compared to those of normal patients. "The deficit is not related to the stage of disease", he reported. "Many patients with rather localized disease are markedly immune deficient. We would expect that they would have a difficult time containing their tumor and should have a rapid spread of their disease".

Other members of the team were Sidney H. Golub, PhD and Donald L. Morton, MD.



AWAITING THEIR TURN TO SPEAK during the Symposium on Graduate Education on Surgical Manpower Monday are, from left, Richard Warren, who discussed foreign medical graduates and the manpower pool; Francis D. Moore, surgical manpower distribution; William G. Anyan, methods of redressing maldistribution of manpower; and Merlin K. DuVal, proposals for coping with geographic maldistribution of surgeons. Robert A. Chase, Stanford, presided at the symposium.

Report lethal hazards from smoke from synthetic fibers

Experiments demonstrating the lethal smoke hazards of synthetic fibers used as carpeting in schools, high-rise apartments, and commercial buildings were reported yesterday.

The tests showed that death occurred within one minute following animal exposure to ignited synthetic fibers, such as acrylics. In contrast, death as late as 10 days followed exposure to wool or white pine wood.

"These studies clearly demonstrate the lethal hazards of the indiscriminate use of building and decorating materials", said Donald P. Dressler, MD, FACS; Edna Butaney, MD, and Anne W. Phillips, MD, of Harvard Medical School and Youville Hospital, Cambridge. "They strongly indicate that standards of biological tolerance must be established for these materials based on sound investigative work".



CONGRESSMAN JERRY L. PETTIS, right, who delivered the American Urological Association Lecture, chats with Frank Hinman, member of the Board of Regents, who introduced the United States Representative to the audience. Pettis' lecture concerned "Health Problems: American and Chinese Perspectives" and he showed a film of an operation that he witnessed while on a tour of the People's Republic of China this summer.

Eleven trauma seminars remain

Eleven of the originally scheduled 16 trauma seminars, sponsored by the ACS Committee on Trauma and departments of surgery, remain; four will be held in 1973, and seven in 1974.

Detailed information can be obtained today in booth S-52 in the scientific exhibit area in McCormick Place.

The remaining seminars scheduled for 1973 include:
Nov. 14-17 Memphis
Nov. 26-29 Dallas
Dec. 5-7 San Francisco
Dec. 12-15 Denver

The seminars scheduled for 1974 include:

Jan. 14-17 New Orleans
March 27-30 Tampa
April 16-19 Washington, DC
May 8-11 Cincinnati
June 17-21 New Haven
Sept. 11-14 Los Angeles
Sept. 18-21 Chicago (Maywood)

Registration facts & figures

As of 5:00 pm Wednesday
Doctors 9,393
Ladies 2,962
Exhibitors 2,265
Visitors 663
Press and staff 401
Total 15,684

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Extracorporeal organ surgery begins today's papers session

The second of two papers sessions will be presented this afternoon, beginning at 1:00 in the Arie Crown Theatre, McCormick Place. The eight papers concern various clinical and laboratory work not previously presented or published.

Extracorporeal Organ Surgery, by Prof. Lars-Erik Gelin, MD, an Honorary Fellow-elect of Gothenburg, Sweden, will begin the two hour session, and be followed by *Air Bypass Voice Prosthesis for Vocal Rehabilitation of Laryngectomees*, presented by Stanley Taub, MD, FACS of New York City.

The remaining papers are: *The Importance of Adequate Nutrition on Closure of Small Intestinal Fistulae*, by Lloyd D. MacLean, MD, FRCS(C), FACS, Montreal, et al; *Should Hyperalimentation be used in the Potentially Septic Patient?*, presented by Edward M. Cope-

land III, MD, Houston, et al; and *Surgical Treatment for Gastrointestinal bleeding in Cirrhotics*, by Hero van Urk, MD, Capelle A/D, The Netherlands, et al.

Also, *The Beta Subunit Radioimmunoassay of Human Chorionic Gonadotropin: a New Test for the Early Detection of Trophoblastic and Non-trophoblastic Tumors in Males and Females*, by Donald P. Goldstein, MD, FACS, Boston, et al; and *Use of Selective Venous Sampling and Parathyroid Hormone Radioimmunoassay in Localizing Hyperfunctioning Parathyroid Glands Preoperatively*, by Samuel A. Wells, Jr., MD, Durham.

The final paper is *Total Surgical Repair for Tricuspid Atresia*, to be presented by Constantine J. Tatoes, MD, FACS, Chicago, et al.

Prostate cancer

Drug may help cut therapy side effects

To victims of cancer of the prostate, the most common form of cancer in men over 55, the standard forms of treatment are sometimes associated with serious, and possibly lethal, complications. These include sexual impotence, castration, water retention, intestinal irritability, and, according to a Veterans Administration report, the real possibility of an increase of the chance of death from cardiac disease.

Two Harvard Medical School researchers are testing a new drug that appears to correct some of the frustrating side effects of conventional therapy. They will present their findings this morning.

It is too early in their study to say that the new drug is any kind of a cure, because prostate cancer grows slowly, usually occurs in older men who may die of something else first, and is infrequently diagnosed early enough to be cured surgically.

Until the early 1940's there was no effective treatment of prostatic cancer. In 1941 the observation by Nobel Prize winner Charles B. Huggins that testosterone contributed to the growth of prostate cells, led to the first meaningful treatment of this form of cancer. Patients were either castrated or given regular doses of stilbestrol, a synthetic hormone that caused chemical "castration". Permanent impotence is one of the more unpleasant side effects, although this drug in certain diagnoses has been implicated as a cause of the increase in risk of heart and blood vessel disease.

The prostate is a vital organ in the human reproductive process. Although its functions are not completely understood, it appears to be the organ in which the sperm is "armed"—provided with nutrients, and prepared for invasion of the female reproductive tract. A peculiarity of prostatic cancer is that the cancer cells and normal prostatic tissue are often

quite similar in some respects. The new drug being used is an anti-prostatic agent that appears to attack prostatic cancer tissue.

The drug, Sch 13521 is an experimental drug developed by the Schering Corporation. It is being tested by George R. Prout, Jr., MD, FACS and Robert J. Irwin, MD, of Harvard Medical School and Massachusetts General Hospital.

Referring to their report as an "observation", not a conclusive report, the scientists discussed 12 patients between the ages of early 50's and early 70's who have been treated just with Sch 13521. Of the 12, nine have responded favorably. Three of the patients are in complete remission for more than 40 weeks of treatment.

In contrast to patients who receive the usual hormonal therapy or castration, all of the men who had been sexually active before treatment with Sch 13521 remain so. Normal levels of plasma testosterone, an important indicator of normal testicular tissue activity, remain the same. In six of the 12 patients blood enzyme measurements indicate a favorable objective response. In one patient a mass in the neck disappeared, and in this patient obstruction of the kidney was also relieved. Of the four patients with bony pain, two experienced complete relief of pain that Dr. Prout and Dr. Irwin term a clear cut subjective response.

Cautioning against any assumption that the new drug



ACS PAST PRESIDENTS, who form the Advisory Council to the Board of Regents, met Tuesday noon for their annual luncheon and meeting. Those present were, clockwise, J. Englebert Dunphy, 1963-64; Frank Glenn, 1954; Howard A. Patterson, 1965-66; Alton Ochsner, 1951-52; Joel W. Baker, 1969-70; Loyal Davis, 1962-63; Jonathan E. Rhoads, 1971-72; Howard Mahorner, 1970-71; Warren H. Cole, 1955-56; ACS Director C. Rollins Hanlon; Reed M. Nesbit, 1967-68; Walter C. MacKenzie, 1966-67; and Robert M. Zollinger, 1961-62.

Breast cancer therapy

Estrogen need determined by test

A test to help determine which breast cancer victims will be helped by administering female sex hormone was outlined yesterday by a group from the University of Oregon Medical School.

Benjamin S. Leung, PhD; William S. Fletcher, MD, FACS; and William W. Krip-paehne, MD, FACS, said some breast cancers are stimulated by the female hormone, estrogen, and others are repressed by it. The regression rate following removal of the ovaries and adrenal glands which secrete estrogen is about 30 percent and patients who do respond favorably usually have the longest effects.

A way of predicting which women will respond to treatment would simplify the selection so that those who have no real potential for benefit would not be subjected to the operations and would be treated with chemotherapy or other treatment.

The authors said the test involves studying the cancers for the presence of estrogen-binding protein. The patients who demonstrate estrogen receptors in their tumors are the best candidates for operations that remove the sources of estrogen production.

In a total of 120 patients, estrogen receptors were present

in 4 of 31 benign breast tumors, 23 of 44 primary breast tumors and 24 of 45 metastatic tumors. Of 40 patients undergoing removal of ovaries or adrenal glands, 20 had tumors for estrogen receptors, 16 were negative and 4 had mixed tumors. Ten patients showed complete remission, 5 showed a partial response, one showed no change, and 3 showed tumor progression.

"It is interesting to note that the estrogen-positive patients who did not respond or had short responses to ablation had extensive liver metastases and usually responded well to subsequent chemotherapy", said the authors.

Starting times change for this afternoon

Creatures of habit should give special attention to the starting times of this afternoon's meetings. Schedules have been altered slightly in order to allow Fellows and Initiates to attend the annual meeting.

Particularly affected by these time changes are the Postgraduate Courses and Motion Picture Exhibition which will begin at 1:00 pm today instead of 1:30, as set in the preceding days of this week.

Today's afternoon sessions should finish with sufficient time for Fellows and Initiates to arrive at the Arie Crown Theatre of McCormick Place for the 4:00 annual meeting.

The official Clinical Congress program reflects the exact time alterations.

should replace conventional therapy, the researchers are now engaged in a more conclusive, controlled study of its use in a larger patient population. They also emphasized that the drug had no clear cut effect on patients who had received other forms of hormone therapy that did not prove effective.

Ciné Clinics feature six today

Claude H. Organ, Jr., MD, FACS of Omaha, will preside at today's presentation of the Ciné Clinics, in the Arie Crown Theatre of McCormick Place. The program begins at 8:30 am.

Included in this showing is a film concerning a Clamless technique of abdominal hysterectomy resulting in reduced febrile morbidity. The creator is A. Cullen Richardson, MD, FACS of Atlanta, who will narrate his film.

Techniques of renal transplantation, by Samuel L. Kountz, MD, FACS of Brooklyn, is another of the films to be presented. John S. Najarian,

MD, FACS of Minneapolis, will be on hand as the discussant.

A new operative technique of vagotomy which may be performed without a supplementary drainage procedure is demonstrated in Parietal cell vagotomy, by Lloyd M. Nyhus, MD, FACS of Chicago, to be discussed by John L. Sawyers, MD, FACS of Nashville.

Ciné Clinics are a cooperative effort of the Motion Picture Committee of ACS and Davis & Geck, suture manufacturer. Film authors are selected by the Committee for their teaching skills and innovative developments in the subjects selected.



NEXT YEAR'S CLINICAL CONGRESS is in Miami Beach, the first time the Congress will be held in that city. Lou DeMangus of the local Convention Bureau has been busy this week distributing information and answering questions from his booth in McCormick Place. He is assisted by Jan M. Patterson. Dates of the Congress are Oct. 21-25.

MESSAGES

791-6607	791-6608
791-6609	791-6610



KNOWING BY LONG EXPERIENCE where most of a science writer's copy ends up, Art Snider, science editor of the **Chicago Daily News**, has chosen a perfect spot for typing his reports about the Clinical Congress. Mr. Snider, widely acclaimed dean of science writers and a former president of the American Association of Science Writers, has covered surgical news and College meetings for 27 years. More than 100 reporters have registered, as of Wednesday afternoon, in the ACS pressroom.

Lungs put back into dog-donors cause no damage

The ultimate feasibility of transplanting lungs is supported by a report to the Clinical Congress of the American College of Surgeons that lungs removed from an animal and then replaced in that animal had virtually normal structure and function.

A team of investigators from Montefiore Hospital - Albert Einstein College of Medicine, and Harlem Hospital-Columbia University College of Physicians and Surgeons, reported yesterday that four dogs so operated on survived two to five years. The dogs all appeared to have a normal respiratory status and a normal exercise tolerance.

"The importance of this work is that it documents the fact that lung transplantation in itself is compatible with protracted good function of the transplant", said Frank J. Veith, MD, FACS, chief of vascular surgery at Montefiore. "It seems that the process of removing a lung and cutting the nerve supply and lymphatics to that lung do not necessarily produce injury or poor function in that lung. The work supports the ultimate feasibility of successful clinical lung transplantation if the problems associated with rejection and immunosuppression can be predictably and dependably solved".

Also associated in the study were Sigurd Blümcke, MD; Stanley S. Siegelman, MD; Phillip Chandler, MD; and Spencer K. Koerner, MD.

Ask it! Questions about ACS activities?

ACS officers and staff may be at the receiving end of a battery of questions fired by attendants of the Panel for Young Surgeons today at 8:30 am in the Lindheimer Room of McCormick Place. Specific questions regarding the College organization, function, problems, plans and related activities are expected to be asked of this panel of five.

Eric W. Fonkalsrud, MD, FACS, chairman of the ACS Committee to Study Relationships with Young Surgeons, will moderate as prepared talks concerning socioeconomic factors related to the surgeon will be delivered by William P. Longmire, Jr., MD, FACS; C. Rollins Hanlon, MD, FACS; J. Englebert Dunphy, MD, FACS; George R. Dunlop, MD, FACS; and Claude E. Welch, MD, FACS. Dr. Fonkalsrud stated earlier that although the panel is designed for younger surgeons, surgeons of all ages are welcome.

It should be emphasized that this panel is the only part of the Congress program where individuals will have the opportunity to make such queries.

North Dakota Chapter

The North Dakota Chapter of the American College of Surgeons will hold a sociable get-together for its members and their guests from 5:30 to 7:00 pm in Room 806 of the Conrad Hilton tonight.

Annual meeting at 4:00 pm

Guest scholar, chapter charter now on agenda

Two special presentations will take place this afternoon during the Annual Meeting of the Fellows; neither is listed in the official Congress program.

Following the presentation of the 1973 Distinguished Service Award, which is listed, Dario Birolini, MD, FACS, professor of pathology at the University of Sao Paulo, who has been named the 1973 International Scholar by the International Relations Committee of ACS, will receive a medical fellowship of \$2,000 from the Brewer Medical Foundation for a year of graduate study in the United States.

Following the presentation to Dr. Birolini, which in past years had been done earlier in the Congress during a meeting of the International Relations Committee, a charter will be presented to the newest chapter of the American College of Surgeons. Joseph Roger Young, MD, FACS, president of the District of Columbia chapter, the College's 80th, will receive the charter. ACS President William P. Longmire, Jr., will make both presentations.

Other features of the meeting include reports from the chairmen of the Boards of Regents and Governors and from the director of the College.

The annual meeting will be held from 4:00 to 4:45 this afternoon in Arie Crown Theatre, McCormick Place.

All Fellows of the College and Initiates of the Class of 1973 are urged to attend. The remainder of the agenda for the meeting appears on page 28 of the official program.

Please, on your next trip through McCormick Place, stop by the information booth, adjacent to registration, and check to see if you have a message. They are beginning to pile up.

Also, if you are leaving a message for someone, kindly check the alphabetical location, before you insert the card.



A 1923 INITIATE, Raul Bennett y Cordova celebrates his 50th anniversary as a Fellow of the American College of Surgeons with his wife, Rita, at the 59th Annual Clinical Congress in Chicago. Dr. Bennett received his MD degree in 1914 from the University of Pennsylvania and is professor emeritus at Cartagena.

Indium 111-bleomycin

Tumor-seeking drug detects cancer spread sans surgery

Many patients with apparently localized cancers already have cancer that has spread through the body and therefore are not curable by surgical treatment. The ability to detect cancer spread would therefore greatly improve the results of cancer surgery. A group from the University of California at Los Angeles reported yesterday on results from a study of 75 cancer patients scanned with a new radioactive tumor-seeking drug, Indium 111-bleomycin. These results indicate a non-surgical means of determining the stage of a cancer may be at hand.

The total body scanning showed accuracy in 59 of 75 patients (78.6 percent accuracy). Unsuspected disease was found in 8 patients. There were two false negatives and five false positives results. The remaining nine patients had ab-

normal accumulation in areas of known non-cancerous disease. If these nine patients with known areas of non-malignancy are eliminated, the accuracy of this new scan approaches 95 percent. Indium-111 bleomycin concentrated measured in excised tumor tissue was 60 times the concentration in normal skeletal tissue.

"The usefulness of accurate pre-operative staging cannot be overemphasized", said M. J. Silverstein, MD, director of the UCLA Multidisciplinary Breast Clinic. "It may prevent patients with occult metastatic disease from needless radical surgery while it may extend to other patients a chance for surgical cure".

Collaborators in the study were Ramesh C. Verma, MD; Juan J. Touya, MD; Leslie R. Bennett, MD; and Donald L. Morton, MD.

Clinitapes catches conversation PA system quiets at PG No. 3

Those of you who attended the Tuesday morning session of Postgraduate Course #3, Diseases of the Liver, Biliary Tract, and Pancreas know what happened to the public address system for the first 20 minutes; those of you who did not attend can easily infer.

But not all is lost; in fact, nothing was. The persons who run the ACS/Clinitapes re-

orders — ever on the ball — caught each and every word. The tapes for this complete course, for the other 15 PG courses, all panel discussions and symposia, and all major lectures, will be available approximately six weeks after the Congress.

Information on the tape programs, including order forms, for this and other recent ACS

meetings can be picked up in Booth #647 in the industrial exhibit section of McCormick Place anytime today.

Tomorrow, although the exhibit hall will be closed, the Clinitape-makers will be in Room 20-7W, also in McCormick Place, where orders can be placed at, or information taken from, until 5:00 pm.